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CONFIRMATION NO. 5750

<b>SERIAL NUMBER</b> 10/782,053	<b>FILING OR 371(c) DATE</b> 02/19/2004 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2629	<b>ATTORNEY DOCKET NO.</b> LAMA122426
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**\*\* CONTINUING DATA \*\*\*\*\***

NO/HT

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

CANADA 2,419,655 02/21/2003

Yes/HT

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 05/13/2004

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Herman N. Tran</u> <u>HT</u> Examiner's Signature Initials				

**ADDRESS**

26389

**TITLE**

Mouth activated input device for an electronically responsive device

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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